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OLIFF & BER P.O. BOX 19928 ALEXANDRIA	3		I her State addr trans	reby certify that this Fector Postal Service with stressed to the Mail Stop smitted to the USPTO (5)	te of Mailing or Transnets) Transmittal is being ufficient postage for first ISSUE FEE address (71) 273-2885, on the date.	nission deposited with the United t class mail in an envelope above, or being facsimile ate indicated below.	
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APPLICATION NO.	FILING DATE	T	FIRST NAMED INVENTOR	ATT	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/565,966	04/11/2006		Heinz Lippuner	einz Lippuner 126752 8438		8438	
TITLE OF INVENTION: METHOD FOR CHECKING OR CALIBRATING THE ANGLE-DEPENDENT ALIGNMENT OF A HIGH-PRECISION TEST-PIECE TEST-PIECE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400: \$ 1440	\$300	\$0 10/18/2007 A	\$1.700 \$1.74 WONDAF2 00000082 1	D 11/28/2007 9565966	
EXAMINER		ART UNIT	CLASS-SUBCLASS	01 FC:1501 1440.00 OP 02 FC:1504 300.00 OP			
FULTON, CHRISTOPHER W		2859	033-290000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attorney.	or printing on the patent front page, list the names of up to 3 registered patent attorneys tents OR, alternatively, the name of a single firm (having as a member a tered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is 1 Oliff & Berridge, PLC 2 3 3			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Leica Geosystems AG Heerbrugg, Switzerland							
Please check the appropriate assignee category or eategories (will not be printed on the patent): 🔲 Individual 😢 Corporation or other private group entity							
4a. The following fcc(s) are submitted:			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Ck# 197986 Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte tes Patent and Trademark	ed from anyone other than to Office.	he applicant; a registere	d attorney or agent; or th	e assignee or other party in	
Authorized Signature	0 1 -	Dangem.	4	Date Octobe	r 17, 2007		
Typed or printed name Samuel T. Dangremond Registration No. 60,466							
Alexandria, Virginia 223	313-1450.	NOT SEND FEES OK	on is required to obtain or 1.14. This collection is esty depending upon the individend in the complete of the	O THIS ADDRESS. SE	ND 10. Commissioner	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.	